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PTO/SB/05 (11-00)

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# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

|                        |  |
|------------------------|--|
| Attorney Docket No.    | 22727/04124  |
| First Inventor         | Brueggemeier et al.  |
| Title                  | 2-HETEROSUBSTITUTED 2-ARYL-4H-1-BENZOPYRAN-4-ONES AS NOVEL THERAPEUTICS IN BREAST CANCER |
| Express Mail Label No. | EL084749864US  |
| Deposited by           | Kristin J. Frost   |

## APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents

- ☒ Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original and a duplicate for fee processing)
- ☒ Applicant claims small entity status.  
See 37 CFR 1.27.
- ☒ Specification [Total Pages 25]  
(preferred arrangement set forth below)
  - Descriptive title of the invention
  - Cross Reference to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to sequence listing, a table, or a computer program listing appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claim(s)
  - Abstracts
- ☒ Informal Drawing(s) (35 U.S.C. 113) [Total Pages 9]
- Oath or Declaration [Total Pages 2]
  - ☒ Unexecuted (original or copy)
  - ☐ Copy from a prior application (37 CFR 1.63 (d))  
(for continuation/divisional with Box 18 completed)
    - ☐ DELETION OF INVENTOR(S)  
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)
- ☐ Application Data Sheet. See 37 CFR 1.76

## ADDRESS TO:

Mail Stop PATENT APPLICATION  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

- ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
- Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
  - ☐ Computer Readable Form (CRF)
  - Specification Sequence Listing on:
    - ☐ CD-ROM or CD-R (2 copies); or
    - ☐ paper
  - ☐ Statements verifying identity of above copies

10746 U.S. PTO  
10/634463  
08/04/03

## ACCOMPANYING APPLICATION PARTS

- ☐ Assignment Papers (cover sheet & document(s))
- ☐ 37 CFR 3.73(b) Statement ☐ Power of Attorney  
(when there is an assignee)
- ☐ English Translation Document (if applicable)
- ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
- ☐ Preliminary Amendment
- ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
- ☐ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)
- ☐ Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i).  
Applicant must attach form PTO/SB/35 or its equivalent
- ☐ Other:

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation

☐ Divisional

☐ Continuation-in-part (CIP)

of prior application No.:

Prior application information:

Examiner:

Group Art Unit:

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

## 19. CORRESPONDENCE ADDRESS

24024

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Signature

Kristin J. Frost

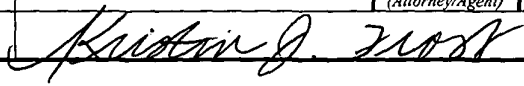
Date

August 4, 2003

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|--|--|--------------------------|--|
| <h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">for FY 2003</h3> <p style="margin: 5px 0 0 40px;"><i>Patent fees are subject to annual revision</i></p> |  | <b>Complete if Known</b> |  |
| <b>TOTAL AMOUNT OF PAYMENT</b>   |  | <b>(\$)</b> 444.00       |  |
| <b>Application Number</b>  |  | Not yet assigned         |  |
| <b>Filing Date</b>   |  | Herewith                 |  |
| <b>First Named Inventor</b>  |  | Brueggemeier et al.      |  |
| <b>Examiner Name</b>   |  | Not yet assigned         |  |
| <b>Group Art Unit</b>  |  | Not yet assigned         |  |
| <b>Attorney Docket No.</b>   |  | 22727/04124              |  |

| METHOD OF PAYMENT   |                       |                |                       |  |              | FEE CALCULATION (continued)   |             |                |             |                 |          |          |                       |          |                       |                    |          |     |     |     |     |                                     |  |     |     |     |     |  |  |     |     |     |     |                           |  |     |       |     |       |  |  |                     |      |     |      |  |              |                |             |                |             |   |          |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |  |  |     |       |     |     |  |  |                     |     |     |     |                  |              |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |
|---|-----------------------|----------------|-----------------------|--|--------------|---|-------------|----------------|-------------|-----------------|----------|----------|-----------------------|----------|-----------------------|--------------------|----------|-----|-----|-----|-----|-------------------------------------|--|-----|-----|-----|-----|--|--|-----|-----|-----|-----|---------------------------|--|-----|-------|-----|-------|--|--|---------------------|------|-----|------|--|--------------|----------------|-------------|----------------|-------------|---|----------|-----|-----|-----|----|--|--|-----|-----|-----|-----|---|--|-----|-----|-----|-----|--|--|-----|-------|-----|-----|--|--|-----|-------|-----|-----|--|--|---------------------|-----|-----|-----|------------------|--------------|-----|-----|-----|-----|--|--|-----|-----|-----|-----|--------------------------|--|-----|-------|-----|-------|---|--|-----|-----|-----|----|----------------------------------|--|-----|-------|-----|-----|------------------------------------|--|-----|-------|-----|-----|--------------------------------|--|-----|-----|-----|-----|------------------|--|-----|-----|-----|-----|-----------------|--|-----|-----|-----|-----|-------------------------------|--|-----|----|-----|----|-------------------------------------|--|-----|-----|-----|-----|---|--|-----|----|-----|----|--|--|-----|-----|-----|-----|---|--|-----|-----|-----|-----|--|--|-----|-----|-----|-----|---|--|-----|-----|-----|-----|---|--|---------------------|--|--|--|--|--|---------------------|--|--|--|--|------|
| <p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:</p> <p>Deposit Account Number: <span style="border: 1px solid black; padding: 2px 20px;">03-0172</span></p> <p>Deposit Account Name: <span style="border: 1px solid black; padding: 2px 20px;">Calfee, Halter &amp; Griswold, LLP</span></p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17</p> <p><input checked="" type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27</p> <p>2. <input type="checkbox"/> Payment Enclosed:<br/> <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other</p>  |                       |                |                       |  |              | <p>3. ADDITIONAL FEES</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Fee Code</th> <th>Large Entity Fee (\$)</th> <th>Fee Code</th> <th>Small Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>105</td><td>130</td><td>205</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>127</td><td>50</td><td>227</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>139</td><td>130</td><td>139</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>147</td><td>2,520</td><td>147</td><td>2,520</td><td>For filing a request for <i>ex parte</i> reexamination</td><td></td></tr> <tr><td>112</td><td>920*</td><td>112</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>113</td><td>1,840*</td><td>113</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>115</td><td>110</td><td>215</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>116</td><td>410</td><td>216</td><td>205</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>117</td><td>930</td><td>217</td><td>465</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>118</td><td>1,450</td><td>218</td><td>725</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>128</td><td>1,970</td><td>228</td><td>985</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>119</td><td>320</td><td>219</td><td>160</td><td>Notice of Appeal</td><td></td></tr> <tr><td>120</td><td>320</td><td>220</td><td>160</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>121</td><td>280</td><td>221</td><td>140</td><td>Request for oral hearing</td><td></td></tr> <tr><td>138</td><td>1,510</td><td>138</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>140</td><td>110</td><td>240</td><td>55</td><td>Petition to revive - unavoidable</td><td></td></tr> <tr><td>141</td><td>1,280</td><td>241</td><td>640</td><td>Petition to revive - unintentional</td><td></td></tr> <tr><td>142</td><td>1,280</td><td>242</td><td>640</td><td>Utility issue fee (or reissue)</td><td></td></tr> <tr><td>143</td><td>460</td><td>243</td><td>230</td><td>Design issue fee</td><td></td></tr> <tr><td>144</td><td>620</td><td>244</td><td>310</td><td>Plant issue fee</td><td></td></tr> <tr><td>122</td><td>130</td><td>122</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>123</td><td>50</td><td>123</td><td>50</td><td>Processing fee under 37 CFR 1.17(q)</td><td></td></tr> <tr><td>126</td><td>180</td><td>126</td><td>180</td><td>Submission of Information Disclosure Stmt</td><td></td></tr> <tr><td>581</td><td>40</td><td>581</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td><td></td></tr> <tr><td>146</td><td>740</td><td>246</td><td>370</td><td>Filing a submission after final rejection (37 CFR § 1.129(a))</td><td></td></tr> <tr><td>149</td><td>740</td><td>249</td><td>370</td><td>For each additional invention to be examined (37 CFR § 1.129(b))</td><td></td></tr> <tr><td>179</td><td>740</td><td>279</td><td>370</td><td>Request for Continued Examination (RCE)</td><td></td></tr> <tr><td>169</td><td>900</td><td>169</td><td>900</td><td>Request for expedited examination of a design application</td><td></td></tr> <tr><td colspan="5">Other fee (specify)</td><td></td></tr> <tr> <td colspan="5" style="text-align: right;"><b>SUBTOTAL (3)</b></td> <td style="text-align: center;">(\$)</td> </tr> </tbody> </table> |             |                |             |                 |          | Fee Code | Large Entity Fee (\$) | Fee Code | Small Entity Fee (\$) | Fee Description    | Fee Paid | 105 | 130 | 205 | 65  | Surcharge - late filing fee or oath |  | 127 | 50  | 227 | 25  | Surcharge - late provisional filing fee or cover sheet |  | 139 | 130 | 139 | 130 | Non-English specification |  | 147 | 2,520 | 147 | 2,520 | For filing a request for <i>ex parte</i> reexamination |  | 112                 | 920* | 112 | 920* | Requesting publication of SIR prior to Examiner action |              | 113            | 1,840*      | 113            | 1,840*      | Requesting publication of SIR after Examiner action |          | 115 | 110 | 215 | 55 | Extension for reply within first month |  | 116 | 410 | 216 | 205 | Extension for reply within second month |  | 117 | 930 | 217 | 465 | Extension for reply within third month |  | 118 | 1,450 | 218 | 725 | Extension for reply within fourth month            |  | 128 | 1,970 | 228 | 985 | Extension for reply within fifth month                     |  | 119                 | 320 | 219 | 160 | Notice of Appeal |              | 120 | 320 | 220 | 160 | Filing a brief in support of an appeal |  | 121 | 280 | 221 | 140 | Request for oral hearing |  | 138 | 1,510 | 138 | 1,510 | Petition to institute a public use proceeding |  | 140 | 110 | 240 | 55 | Petition to revive - unavoidable |  | 141 | 1,280 | 241 | 640 | Petition to revive - unintentional |  | 142 | 1,280 | 242 | 640 | Utility issue fee (or reissue) |  | 143 | 460 | 243 | 230 | Design issue fee |  | 144 | 620 | 244 | 310 | Plant issue fee |  | 122 | 130 | 122 | 130 | Petitions to the Commissioner |  | 123 | 50 | 123 | 50 | Processing fee under 37 CFR 1.17(q) |  | 126 | 180 | 126 | 180 | Submission of Information Disclosure Stmt |  | 581 | 40 | 581 | 40 | Recording each patent assignment per property (times number of properties) |  | 146 | 740 | 246 | 370 | Filing a submission after final rejection (37 CFR § 1.129(a)) |  | 149 | 740 | 249 | 370 | For each additional invention to be examined (37 CFR § 1.129(b)) |  | 179 | 740 | 279 | 370 | Request for Continued Examination (RCE) |  | 169 | 900 | 169 | 900 | Request for expedited examination of a design application |  | Other fee (specify) |  |  |  |  |  | <b>SUBTOTAL (3)</b> |  |  |  |  | (\$) |
| Fee Code  | Large Entity Fee (\$) | Fee Code       | Small Entity Fee (\$) | Fee Description  | Fee Paid     |   |             |                |             |                 |          |          |                       |          |                       |                    |          |     |     |     |     |                                     |  |     |     |     |     |  |  |     |     |     |     |                           |  |     |       |     |       |  |  |                     |      |     |      |  |              |                |             |                |             |   |          |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |  |  |     |       |     |     |  |  |                     |     |     |     |                  |              |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |
| 105   | 130                   | 205            | 65                    | Surcharge - late filing fee or oath  |              |   |             |                |             |                 |          |          |                       |          |                       |                    |          |     |     |     |     |                                     |  |     |     |     |     |  |  |     |     |     |     |                           |  |     |       |     |       |  |  |                     |      |     |      |  |              |                |             |                |             |   |          |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |  |  |     |       |     |     |  |  |                     |     |     |     |                  |              |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |
| 127   | 50                    | 227            | 25                    | Surcharge - late provisional filing fee or cover sheet                     |              |   |             |                |             |                 |          |          |                       |          |                       |                    |          |     |     |     |     |                                     |  |     |     |     |     |  |  |     |     |     |     |                           |  |     |       |     |       |  |  |                     |      |     |      |  |              |                |             |                |             |   |          |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |  |  |     |       |     |     |  |  |                     |     |     |     |                  |              |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |
| 139   | 130                   | 139            | 130                   | Non-English specification  |              |   |             |                |             |                 |          |          |                       |          |                       |                    |          |     |     |     |     |                                     |  |     |     |     |     |  |  |     |     |     |     |                           |  |     |       |     |       |  |  |                     |      |     |      |  |              |                |             |                |             |   |          |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |  |  |     |       |     |     |  |  |                     |     |     |     |                  |              |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |
| 147   | 2,520                 | 147            | 2,520                 | For filing a request for <i>ex parte</i> reexamination                     |              |   |             |                |             |                 |          |          |                       |          |                       |                    |          |     |     |     |     |                                     |  |     |     |     |     |  |  |     |     |     |     |                           |  |     |       |     |       |  |  |                     |      |     |      |  |              |                |             |                |             |   |          |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |  |  |     |       |     |     |  |  |                     |     |     |     |                  |              |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |
| 112   | 920*                  | 112            | 920*                  | Requesting publication of SIR prior to Examiner action                     |              |   |             |                |             |                 |          |          |                       |          |                       |                    |          |     |     |     |     |                                     |  |     |     |     |     |  |  |     |     |     |     |                           |  |     |       |     |       |  |  |                     |      |     |      |  |              |                |             |                |             |   |          |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |  |  |     |       |     |     |  |  |                     |     |     |     |                  |              |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |
| 113   | 1,840*                | 113            | 1,840*                | Requesting publication of SIR after Examiner action                        |              |   |             |                |             |                 |          |          |                       |          |                       |                    |          |     |     |     |     |                                     |  |     |     |     |     |  |  |     |     |     |     |                           |  |     |       |     |       |  |  |                     |      |     |      |  |              |                |             |                |             |   |          |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |  |  |     |       |     |     |  |  |                     |     |     |     |                  |              |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |
| 115   | 110                   | 215            | 55                    | Extension for reply within first month                                     |              |   |             |                |             |                 |          |          |                       |          |                       |                    |          |     |     |     |     |                                     |  |     |     |     |     |  |  |     |     |     |     |                           |  |     |       |     |       |  |  |                     |      |     |      |  |              |                |             |                |             |   |          |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |  |  |     |       |     |     |  |  |                     |     |     |     |                  |              |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |
| 116   | 410                   | 216            | 205                   | Extension for reply within second month                                    |              |   |             |                |             |                 |          |          |                       |          |                       |                    |          |     |     |     |     |                                     |  |     |     |     |     |  |  |     |     |     |     |                           |  |     |       |     |       |  |  |                     |      |     |      |  |              |                |             |                |             |   |          |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |  |  |     |       |     |     |  |  |                     |     |     |     |                  |              |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |
| 117   | 930                   | 217            | 465                   | Extension for reply within third month                                     |              |   |             |                |             |                 |          |          |                       |          |                       |                    |          |     |     |     |     |                                     |  |     |     |     |     |  |  |     |     |     |     |                           |  |     |       |     |       |  |  |                     |      |     |      |  |              |                |             |                |             |   |          |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |  |  |     |       |     |     |  |  |                     |     |     |     |                  |              |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |
| 118   | 1,450                 | 218            | 725                   | Extension for reply within fourth month                                    |              |   |             |                |             |                 |          |          |                       |          |                       |                    |          |     |     |     |     |                                     |  |     |     |     |     |  |  |     |     |     |     |                           |  |     |       |     |       |  |  |                     |      |     |      |  |              |                |             |                |             |   |          |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |  |  |     |       |     |     |  |  |                     |     |     |     |                  |              |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |
| 128   | 1,970                 | 228            | 985                   | Extension for reply within fifth month                                     |              |   |             |                |             |                 |          |          |                       |          |                       |                    |          |     |     |     |     |                                     |  |     |     |     |     |  |  |     |     |     |     |                           |  |     |       |     |       |  |  |                     |      |     |      |  |              |                |             |                |             |   |          |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |  |  |     |       |     |     |  |  |                     |     |     |     |                  |              |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |
| 119   | 320                   | 219            | 160                   | Notice of Appeal   |              |   |             |                |             |                 |          |          |                       |          |                       |                    |          |     |     |     |     |                                     |  |     |     |     |     |  |  |     |     |     |     |                           |  |     |       |     |       |  |  |                     |      |     |      |  |              |                |             |                |             |   |          |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |  |  |     |       |     |     |  |  |                     |     |     |     |                  |              |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |
| 120   | 320                   | 220            | 160                   | Filing a brief in support of an appeal                                     |              |   |             |                |             |                 |          |          |                       |          |                       |                    |          |     |     |     |     |                                     |  |     |     |     |     |  |  |     |     |     |     |                           |  |     |       |     |       |  |  |                     |      |     |      |  |              |                |             |                |             |   |          |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |  |  |     |       |     |     |  |  |                     |     |     |     |                  |              |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |
| 121   | 280                   | 221            | 140                   | Request for oral hearing   |              |   |             |                |             |                 |          |          |                       |          |                       |                    |          |     |     |     |     |                                     |  |     |     |     |     |  |  |     |     |     |     |                           |  |     |       |     |       |  |  |                     |      |     |      |  |              |                |             |                |             |   |          |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |  |  |     |       |     |     |  |  |                     |     |     |     |                  |              |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |
| 138   | 1,510                 | 138            | 1,510                 | Petition to institute a public use proceeding                              |              |   |             |                |             |                 |          |          |                       |          |                       |                    |          |     |     |     |     |                                     |  |     |     |     |     |  |  |     |     |     |     |                           |  |     |       |     |       |  |  |                     |      |     |      |  |              |                |             |                |             |   |          |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |  |  |     |       |     |     |  |  |                     |     |     |     |                  |              |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |
| 140   | 110                   | 240            | 55                    | Petition to revive - unavoidable   |              |   |             |                |             |                 |          |          |                       |          |                       |                    |          |     |     |     |     |                                     |  |     |     |     |     |  |  |     |     |     |     |                           |  |     |       |     |       |  |  |                     |      |     |      |  |              |                |             |                |             |   |          |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |  |  |     |       |     |     |  |  |                     |     |     |     |                  |              |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |
| 141   | 1,280                 | 241            | 640                   | Petition to revive - unintentional   |              |   |             |                |             |                 |          |          |                       |          |                       |                    |          |     |     |     |     |                                     |  |     |     |     |     |  |  |     |     |     |     |                           |  |     |       |     |       |  |  |                     |      |     |      |  |              |                |             |                |             |   |          |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |  |  |     |       |     |     |  |  |                     |     |     |     |                  |              |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |
| 142   | 1,280                 | 242            | 640                   | Utility issue fee (or reissue)   |              |   |             |                |             |                 |          |          |                       |          |                       |                    |          |     |     |     |     |                                     |  |     |     |     |     |  |  |     |     |     |     |                           |  |     |       |     |       |  |  |                     |      |     |      |  |              |                |             |                |             |   |          |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |  |  |     |       |     |     |  |  |                     |     |     |     |                  |              |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |
| 143   | 460                   | 243            | 230                   | Design issue fee   |              |   |             |                |             |                 |          |          |                       |          |                       |                    |          |     |     |     |     |                                     |  |     |     |     |     |  |  |     |     |     |     |                           |  |     |       |     |       |  |  |                     |      |     |      |  |              |                |             |                |             |   |          |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |  |  |     |       |     |     |  |  |                     |     |     |     |                  |              |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |
| 144   | 620                   | 244            | 310                   | Plant issue fee  |              |   |             |                |             |                 |          |          |                       |          |                       |                    |          |     |     |     |     |                                     |  |     |     |     |     |  |  |     |     |     |     |                           |  |     |       |     |       |  |  |                     |      |     |      |  |              |                |             |                |             |   |          |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |  |  |     |       |     |     |  |  |                     |     |     |     |                  |              |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |
| 122   | 130                   | 122            | 130                   | Petitions to the Commissioner  |              |   |             |                |             |                 |          |          |                       |          |                       |                    |          |     |     |     |     |                                     |  |     |     |     |     |  |  |     |     |     |     |                           |  |     |       |     |       |  |  |                     |      |     |      |  |              |                |             |                |             |   |          |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |  |  |     |       |     |     |  |  |                     |     |     |     |                  |              |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |
| 123   | 50                    | 123            | 50                    | Processing fee under 37 CFR 1.17(q)  |              |   |             |                |             |                 |          |          |                       |          |                       |                    |          |     |     |     |     |                                     |  |     |     |     |     |  |  |     |     |     |     |                           |  |     |       |     |       |  |  |                     |      |     |      |  |              |                |             |                |             |   |          |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |  |  |     |       |     |     |  |  |                     |     |     |     |                  |              |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |
| 126   | 180                   | 126            | 180                   | Submission of Information Disclosure Stmt                                  |              |   |             |                |             |                 |          |          |                       |          |                       |                    |          |     |     |     |     |                                     |  |     |     |     |     |  |  |     |     |     |     |                           |  |     |       |     |       |  |  |                     |      |     |      |  |              |                |             |                |             |   |          |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |  |  |     |       |     |     |  |  |                     |     |     |     |                  |              |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |
| 581   | 40                    | 581            | 40                    | Recording each patent assignment per property (times number of properties) |              |   |             |                |             |                 |          |          |                       |          |                       |                    |          |     |     |     |     |                                     |  |     |     |     |     |  |  |     |     |     |     |                           |  |     |       |     |       |  |  |                     |      |     |      |  |              |                |             |                |             |   |          |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |  |  |     |       |     |     |  |  |                     |     |     |     |                  |              |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |
| 146   | 740                   | 246            | 370                   | Filing a submission after final rejection (37 CFR § 1.129(a))              |              |   |             |                |             |                 |          |          |                       |          |                       |                    |          |     |     |     |     |                                     |  |     |     |     |     |  |  |     |     |     |     |                           |  |     |       |     |       |  |  |                     |      |     |      |  |              |                |             |                |             |   |          |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |  |  |     |       |     |     |  |  |                     |     |     |     |                  |              |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |
| 149   | 740                   | 249            | 370                   | For each additional invention to be examined (37 CFR § 1.129(b))           |              |   |             |                |             |                 |          |          |                       |          |                       |                    |          |     |     |     |     |                                     |  |     |     |     |     |  |  |     |     |     |     |                           |  |     |       |     |       |  |  |                     |      |     |      |  |              |                |             |                |             |   |          |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |  |  |     |       |     |     |  |  |                     |     |     |     |                  |              |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |
| 179   | 740                   | 279            | 370                   | Request for Continued Examination (RCE)                                    |              |   |             |                |             |                 |          |          |                       |          |                       |                    |          |     |     |     |     |                                     |  |     |     |     |     |  |  |     |     |     |     |                           |  |     |       |     |       |  |  |                     |      |     |      |  |              |                |             |                |             |   |          |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |  |  |     |       |     |     |  |  |                     |     |     |     |                  |              |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |
| 169   | 900                   | 169            | 900                   | Request for expedited examination of a design application                  |              |   |             |                |             |                 |          |          |                       |          |                       |                    |          |     |     |     |     |                                     |  |     |     |     |     |  |  |     |     |     |     |                           |  |     |       |     |       |  |  |                     |      |     |      |  |              |                |             |                |             |   |          |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |  |  |     |       |     |     |  |  |                     |     |     |     |                  |              |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |
| Other fee (specify)   |                       |                |                       |  |              |   |             |                |             |                 |          |          |                       |          |                       |                    |          |     |     |     |     |                                     |  |     |     |     |     |  |  |     |     |     |     |                           |  |     |       |     |       |  |  |                     |      |     |      |  |              |                |             |                |             |   |          |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |  |  |     |       |     |     |  |  |                     |     |     |     |                  |              |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |
| <b>SUBTOTAL (3)</b>   |                       |                |                       |  | (\$)         |   |             |                |             |                 |          |          |                       |          |                       |                    |          |     |     |     |     |                                     |  |     |     |     |     |  |  |     |     |     |     |                           |  |     |       |     |       |  |  |                     |      |     |      |  |              |                |             |                |             |   |          |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |  |  |     |       |     |     |  |  |                     |     |     |     |                  |              |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |
| <p>1. BASIC FILING FEE</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Fee Code</th> <th>Entity (\$)</th> <th>Small Fee Code</th> <th>Entity (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>101</td><td>750</td><td>201</td><td>375</td><td>Utility filing fee</td><td>375</td></tr> <tr><td>106</td><td>330</td><td>206</td><td>165</td><td>Design filing fee</td><td></td></tr> <tr><td>107</td><td>520</td><td>207</td><td>260</td><td>Plant filing fee</td><td></td></tr> <tr><td>108</td><td>750</td><td>208</td><td>375</td><td>Reissue filing fee</td><td></td></tr> <tr><td>114</td><td>160</td><td>214</td><td>80</td><td>Provisional filing fee</td><td></td></tr> <tr> <td colspan="5" style="text-align: right;"><b>SUBTOTAL (1)</b></td> <td style="text-align: center;"><b>\$375</b></td> </tr> </tbody> </table> <p>2. EXTRA CLAIM FEES</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Fee Code</th> <th>Entity (\$)</th> <th>Small Fee Code</th> <th>Entity (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>103</td><td>18</td><td>203</td><td>9</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>102</td><td>84</td><td>202</td><td>42</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>104</td><td>280</td><td>204</td><td>140</td><td>Multiple dependent claim, if not paid</td><td></td></tr> <tr><td>109</td><td>84</td><td>209</td><td>42</td><td>** Reissue independent claims over original patent</td><td></td></tr> <tr><td>110</td><td>18</td><td>210</td><td>9</td><td>** Reissue claims in excess of 20 and over original patent</td><td></td></tr> <tr> <td colspan="5" style="text-align: right;"><b>SUBTOTAL (2)</b></td> <td style="text-align: center;"><b>\$444</b></td> </tr> </tbody> </table> <p><small>** or number previously paid, if greater; For Reissue, see above</small></p> |                       |                |                       |  |              | Large Fee Code  | Entity (\$) | Small Fee Code | Entity (\$) | Fee Description | Fee Paid | 101      | 750                   | 201      | 375                   | Utility filing fee | 375      | 106 | 330 | 206 | 165 | Design filing fee                   |  | 107 | 520 | 207 | 260 | Plant filing fee                                       |  | 108 | 750 | 208 | 375 | Reissue filing fee        |  | 114 | 160   | 214 | 80    | Provisional filing fee                                 |  | <b>SUBTOTAL (1)</b> |      |     |      |  | <b>\$375</b> | Large Fee Code | Entity (\$) | Small Fee Code | Entity (\$) | Fee Description                                     | Fee Paid | 103 | 18  | 203 | 9  | Claims in excess of 20                 |  | 102 | 84  | 202 | 42  | Independent claims in excess of 3       |  | 104 | 280 | 204 | 140 | Multiple dependent claim, if not paid  |  | 109 | 84    | 209 | 42  | ** Reissue independent claims over original patent |  | 110 | 18    | 210 | 9   | ** Reissue claims in excess of 20 and over original patent |  | <b>SUBTOTAL (2)</b> |     |     |     |                  | <b>\$444</b> |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |
| Large Fee Code  | Entity (\$)           | Small Fee Code | Entity (\$)           | Fee Description  | Fee Paid     |   |             |                |             |                 |          |          |                       |          |                       |                    |          |     |     |     |     |                                     |  |     |     |     |     |  |  |     |     |     |     |                           |  |     |       |     |       |  |  |                     |      |     |      |  |              |                |             |                |             |   |          |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |  |  |     |       |     |     |  |  |                     |     |     |     |                  |              |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |
| 101   | 750                   | 201            | 375                   | Utility filing fee   | 375          |   |             |                |             |                 |          |          |                       |          |                       |                    |          |     |     |     |     |                                     |  |     |     |     |     |  |  |     |     |     |     |                           |  |     |       |     |       |  |  |                     |      |     |      |  |              |                |             |                |             |   |          |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |  |  |     |       |     |     |  |  |                     |     |     |     |                  |              |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |
| 106   | 330                   | 206            | 165                   | Design filing fee  |              |   |             |                |             |                 |          |          |                       |          |                       |                    |          |     |     |     |     |                                     |  |     |     |     |     |  |  |     |     |     |     |                           |  |     |       |     |       |  |  |                     |      |     |      |  |              |                |             |                |             |   |          |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |  |  |     |       |     |     |  |  |                     |     |     |     |                  |              |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |
| 107   | 520                   | 207            | 260                   | Plant filing fee   |              |   |             |                |             |                 |          |          |                       |          |                       |                    |          |     |     |     |     |                                     |  |     |     |     |     |  |  |     |     |     |     |                           |  |     |       |     |       |  |  |                     |      |     |      |  |              |                |             |                |             |   |          |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |  |  |     |       |     |     |  |  |                     |     |     |     |                  |              |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |
| 108   | 750                   | 208            | 375                   | Reissue filing fee   |              |   |             |                |             |                 |          |          |                       |          |                       |                    |          |     |     |     |     |                                     |  |     |     |     |     |  |  |     |     |     |     |                           |  |     |       |     |       |  |  |                     |      |     |      |  |              |                |             |                |             |   |          |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |  |  |     |       |     |     |  |  |                     |     |     |     |                  |              |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |
| 114   | 160                   | 214            | 80                    | Provisional filing fee   |              |   |             |                |             |                 |          |          |                       |          |                       |                    |          |     |     |     |     |                                     |  |     |     |     |     |  |  |     |     |     |     |                           |  |     |       |     |       |  |  |                     |      |     |      |  |              |                |             |                |             |   |          |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |  |  |     |       |     |     |  |  |                     |     |     |     |                  |              |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |
| <b>SUBTOTAL (1)</b>   |                       |                |                       |  | <b>\$375</b> |   |             |                |             |                 |          |          |                       |          |                       |                    |          |     |     |     |     |                                     |  |     |     |     |     |  |  |     |     |     |     |                           |  |     |       |     |       |  |  |                     |      |     |      |  |              |                |             |                |             |   |          |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |  |  |     |       |     |     |  |  |                     |     |     |     |                  |              |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |
| Large Fee Code  | Entity (\$)           | Small Fee Code | Entity (\$)           | Fee Description  | Fee Paid     |   |             |                |             |                 |          |          |                       |          |                       |                    |          |     |     |     |     |                                     |  |     |     |     |     |  |  |     |     |     |     |                           |  |     |       |     |       |  |  |                     |      |     |      |  |              |                |             |                |             |   |          |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |  |  |     |       |     |     |  |  |                     |     |     |     |                  |              |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |
| 103   | 18                    | 203            | 9                     | Claims in excess of 20   |              |   |             |                |             |                 |          |          |                       |          |                       |                    |          |     |     |     |     |                                     |  |     |     |     |     |  |  |     |     |     |     |                           |  |     |       |     |       |  |  |                     |      |     |      |  |              |                |             |                |             |   |          |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |  |  |     |       |     |     |  |  |                     |     |     |     |                  |              |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |
| 102   | 84                    | 202            | 42                    | Independent claims in excess of 3  |              |   |             |                |             |                 |          |          |                       |          |                       |                    |          |     |     |     |     |                                     |  |     |     |     |     |  |  |     |     |     |     |                           |  |     |       |     |       |  |  |                     |      |     |      |  |              |                |             |                |             |   |          |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |  |  |     |       |     |     |  |  |                     |     |     |     |                  |              |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |
| 104   | 280                   | 204            | 140                   | Multiple dependent claim, if not paid                                      |              |   |             |                |             |                 |          |          |                       |          |                       |                    |          |     |     |     |     |                                     |  |     |     |     |     |  |  |     |     |     |     |                           |  |     |       |     |       |  |  |                     |      |     |      |  |              |                |             |                |             |   |          |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |  |  |     |       |     |     |  |  |                     |     |     |     |                  |              |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |
| 109   | 84                    | 209            | 42                    | ** Reissue independent claims over original patent                         |              |   |             |                |             |                 |          |          |                       |          |                       |                    |          |     |     |     |     |                                     |  |     |     |     |     |  |  |     |     |     |     |                           |  |     |       |     |       |  |  |                     |      |     |      |  |              |                |             |                |             |   |          |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |  |  |     |       |     |     |  |  |                     |     |     |     |                  |              |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |
| 110   | 18                    | 210            | 9                     | ** Reissue claims in excess of 20 and over original patent                 |              |   |             |                |             |                 |          |          |                       |          |                       |                    |          |     |     |     |     |                                     |  |     |     |     |     |  |  |     |     |     |     |                           |  |     |       |     |       |  |  |                     |      |     |      |  |              |                |             |                |             |   |          |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |  |  |     |       |     |     |  |  |                     |     |     |     |                  |              |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |
| <b>SUBTOTAL (2)</b>   |                       |                |                       |  | <b>\$444</b> |   |             |                |             |                 |          |          |                       |          |                       |                    |          |     |     |     |     |                                     |  |     |     |     |     |  |  |     |     |     |     |                           |  |     |       |     |       |  |  |                     |      |     |      |  |              |                |             |                |             |   |          |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |  |  |     |       |     |     |  |  |                     |     |     |     |                  |              |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |      |

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